

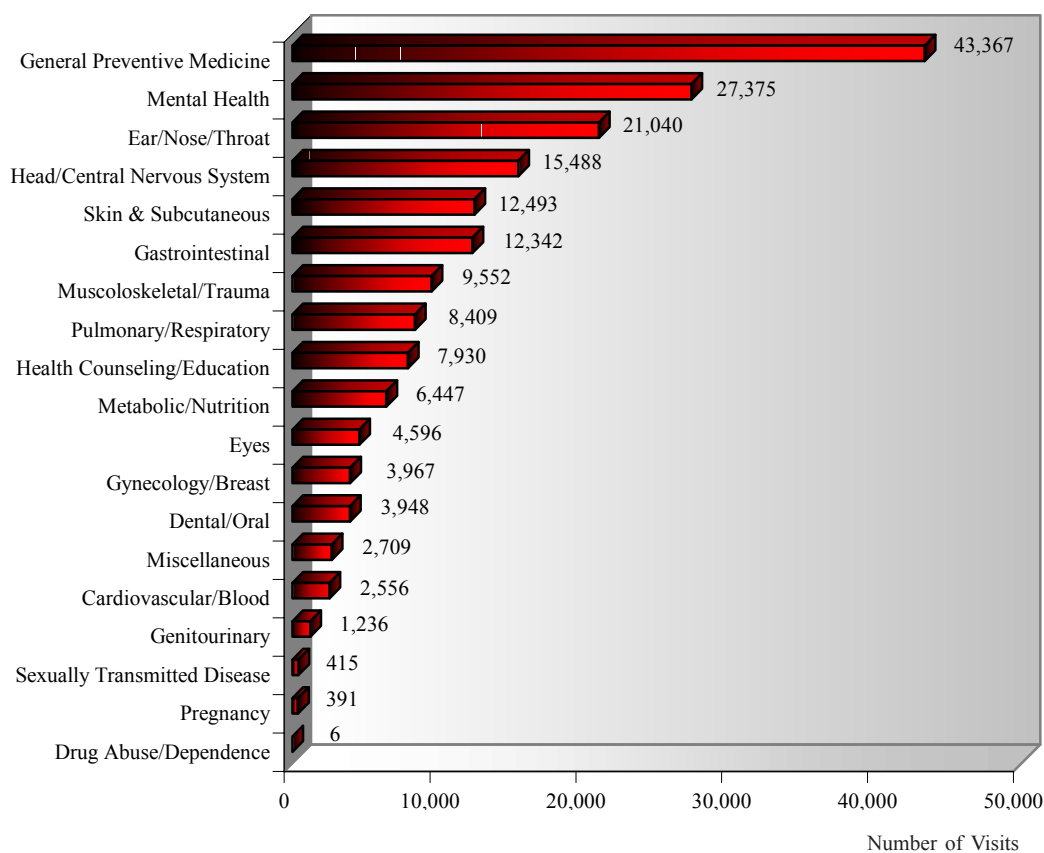
Louisiana School-Based Health Centers



A Glance at 2004-2005 Utilization

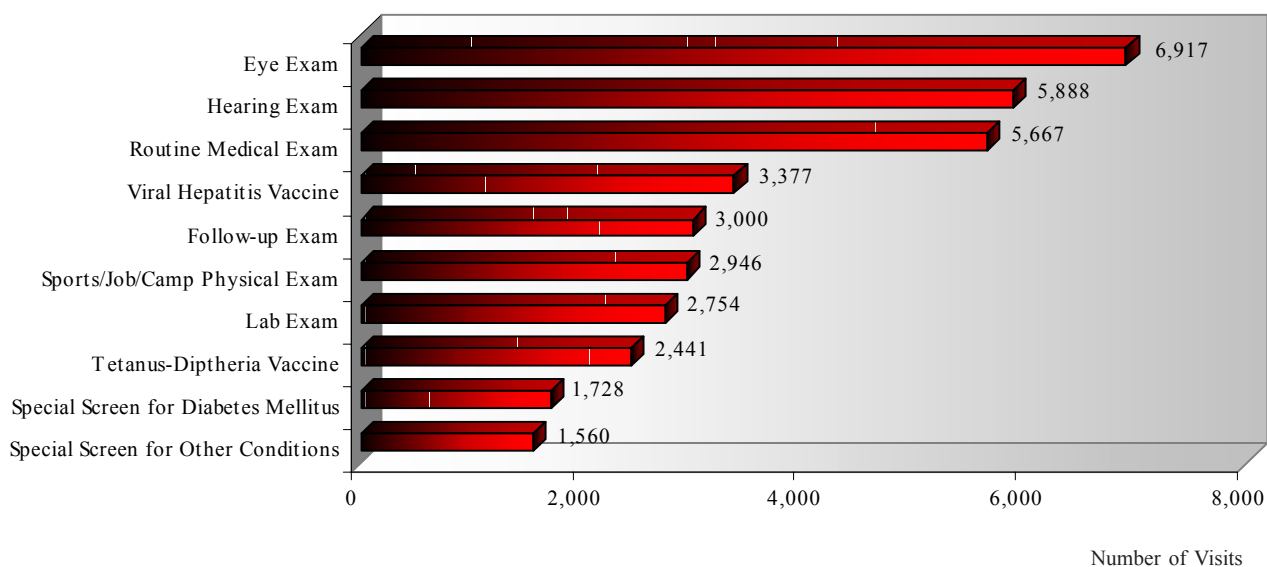
40,113	Students Registered at SBHCs
28,455	Students Received Services at SBHCs
134,339	Total Individual Visits Made to SBHCs
4.7	Average Number of Visits Per Student
4,833	Total Visits For Group Counseling

Number of Conditions Seen at SBHCs, by Category

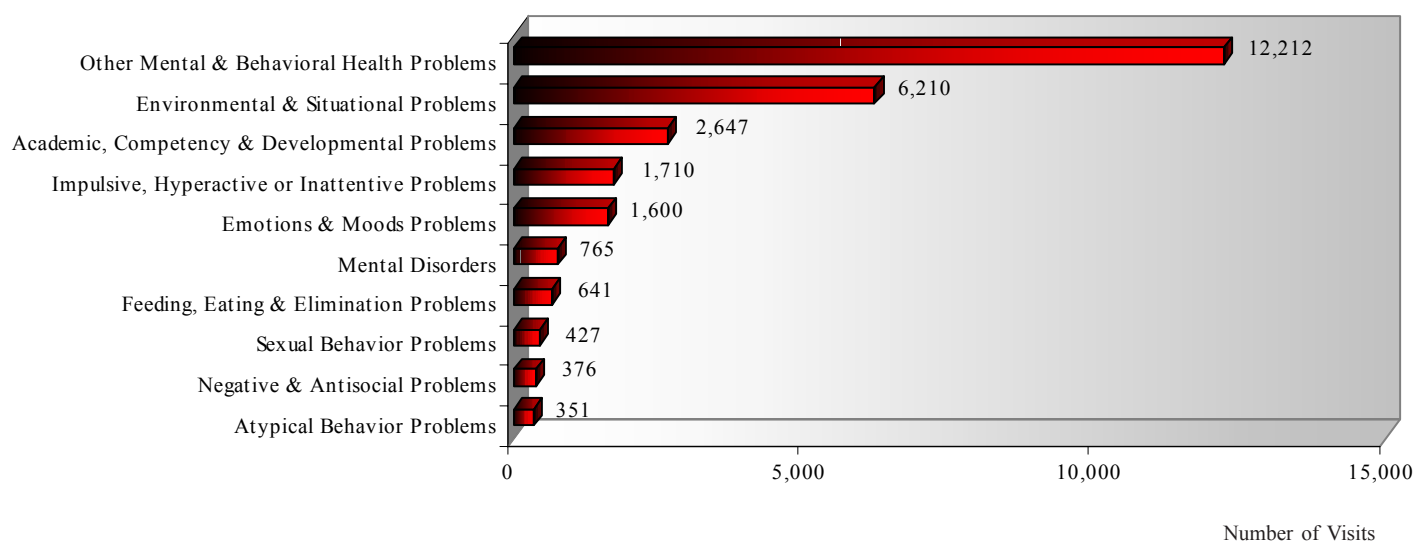




Leading Reasons for General Preventive Medicine Visits

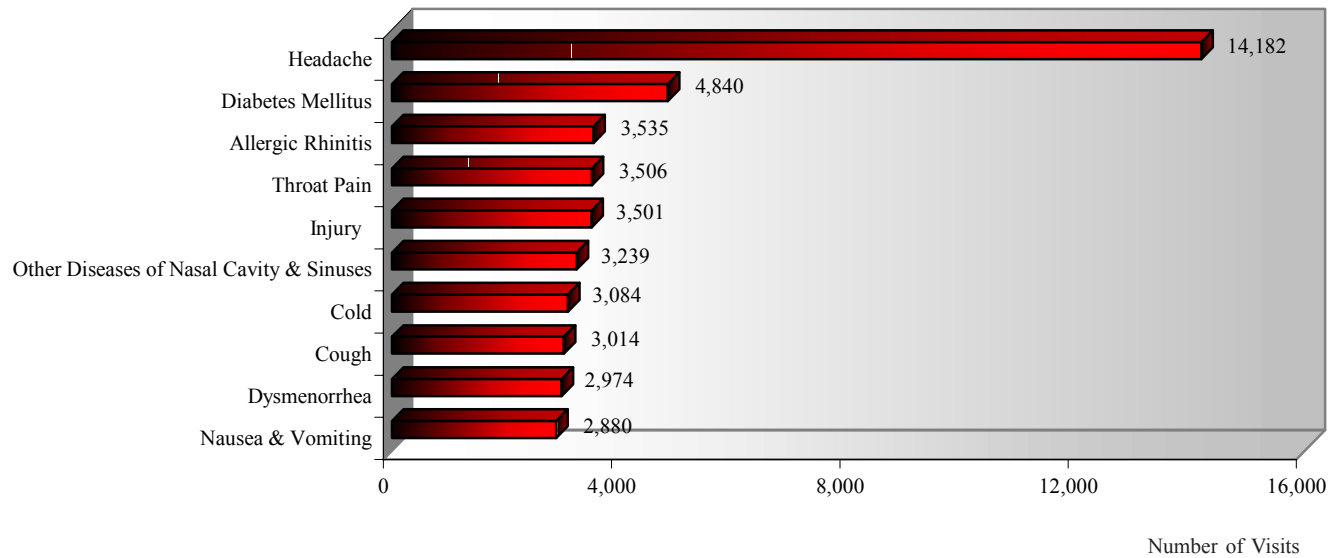


Leading Mental & Behavioral Health Issues Addressed, By Category

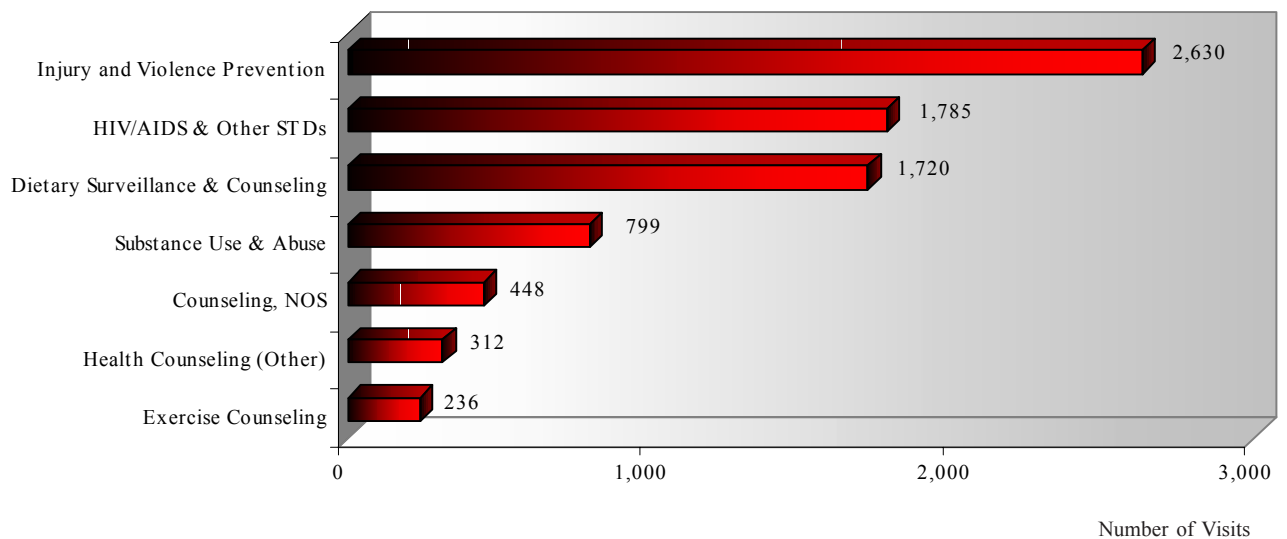




Leading Conditions for Injury and Illness Related Visits

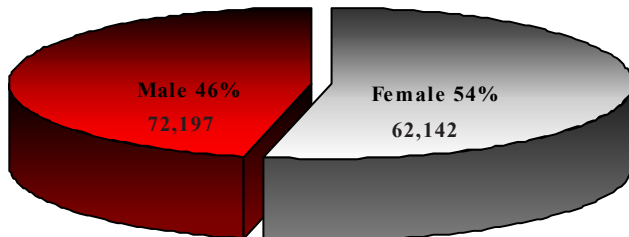


Leading Reasons for Health Counseling and Education Visits

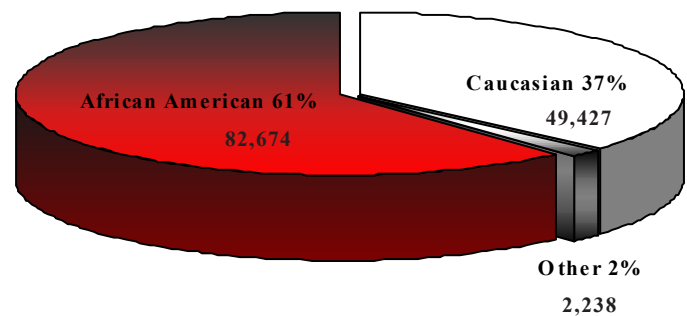




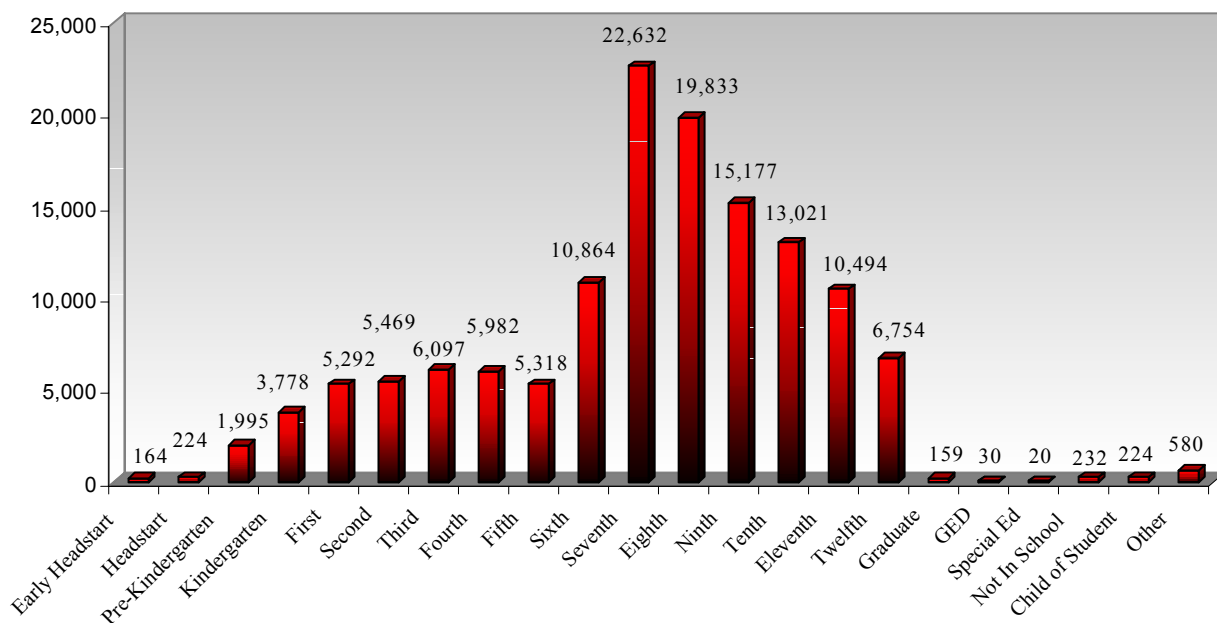
Total Visits, by Sex, 2004-2005



Total Visits, by Race, 2004-2005



Total Visits by Grade for all SBHCs

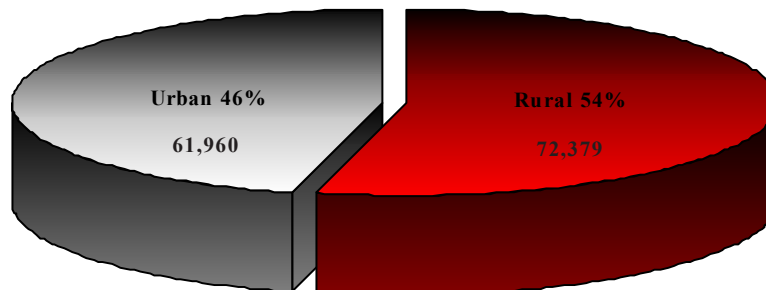


Comparison View of Rural Versus Urban Sites



The Adolescent School Health Initiative began in urban schools with high concentrations of economically disadvantaged and uninsured students. However, immediately after its inception, rural communities recognized the immense value health centers in schools have toward insuring receipt of health care services for adolescents otherwise lacking access to such care. While all adolescents experience similar physical and mental health challenges, both the obvious and subtle differences can be addressed by the local school-based health center because it remains a community-based initiative.

Total Visits by Rural and Urban SBHC Sites, 2004-2005



Comparison Ranking of Top 10 Conditions, Rural versus Urban

Rural

1. General Preventive Medicine
2. Mental Health
3. Ear, Nose & Throat
4. Head & Central Nervous System
5. Skin & Subcutaneous
6. Gastrointestinal
7. Musculoskeletal & Trauma
8. Pulmonary & Respiratory
9. Metabolic
10. Eyes

Urban

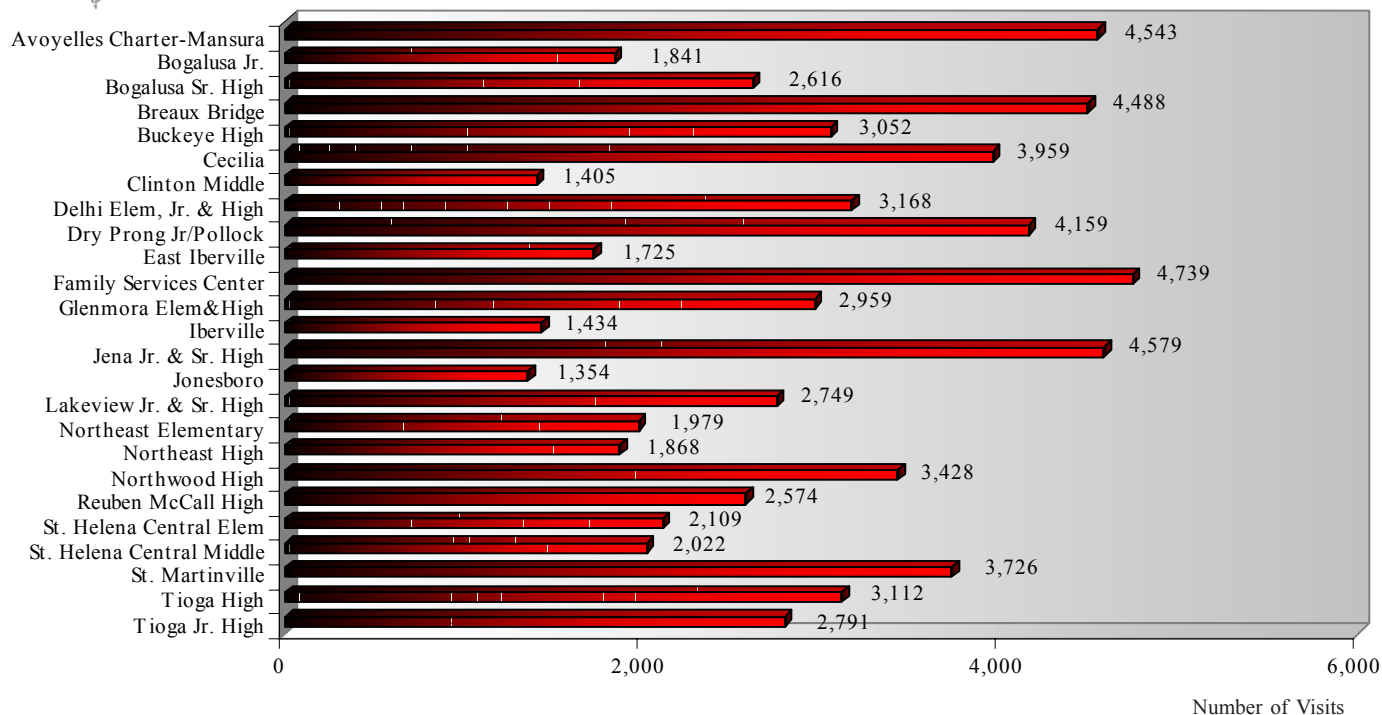
1. General Preventive Medicine
2. Mental Health
3. Ear, Nose & Throat
4. Head & Central Nervous System
5. Health Counseling & Education
6. Skin & Subcutaneous
7. Gastrointestinal
8. Musculoskeletal & Trauma
9. Pulmonary & Respiratory
10. Metabolic

Total Student Visits by Site, 2004-2005

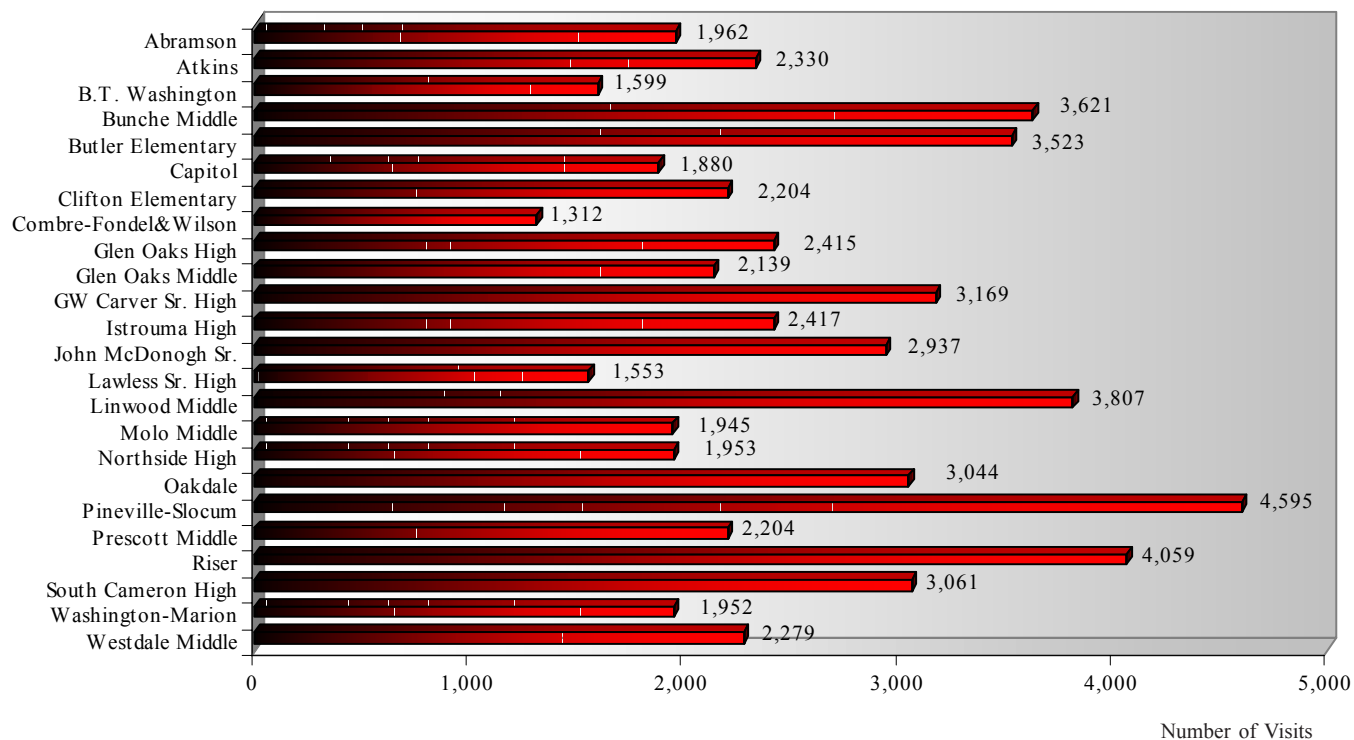
(This includes 4,833 visits for treatment intervention groups.)



Rural Sites

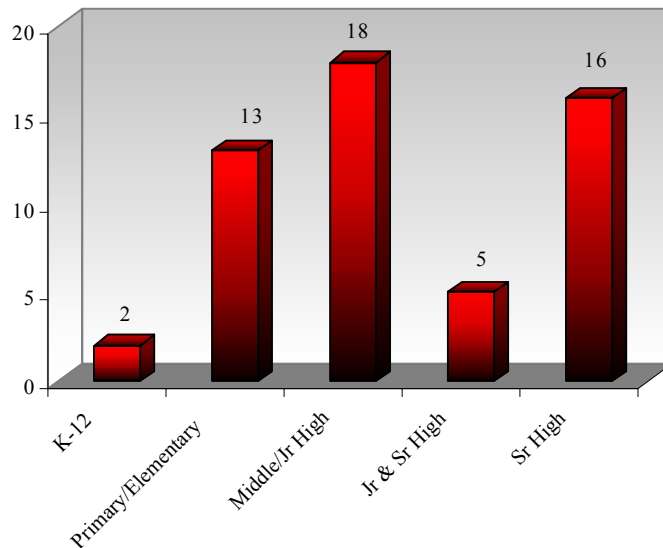


Urban Sites





Type of Schools That House the SBHC

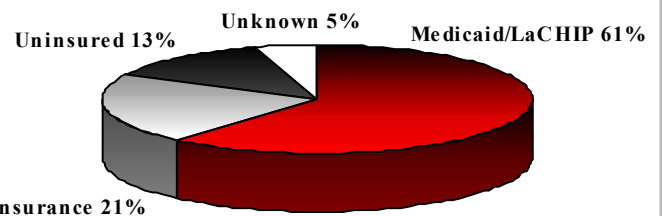
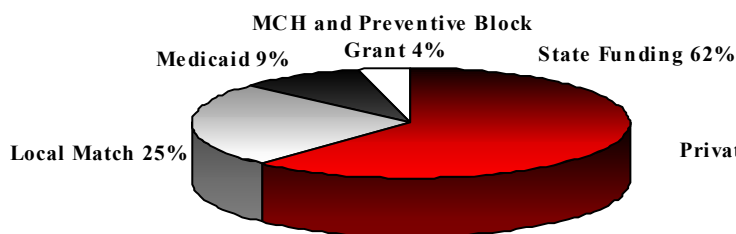


Although SBHCs are mandated to serve middle and high school students, children in primary/elementary schools are also served by these “feeder” locations. (See Visits by Grade on page 19.) In some areas, SBHCs are located on primary/elementary school campuses when no space is available at nearby middle or high schools (left).

The primary reasons OPH funds SBHCs are: (1) that need was demonstrated and (2) lack of access to care. With the implementation of Louisiana’s Children’s Health Insurance Program (LaCHIP), more and more students are now insured (see below).

Sources of SBHC Funding

Insurance Status of Those Using the SBHC



For every dollar the state invests in SBHCs, an additional 61 cents is provided by other sources, including the local communities, federal and private grants, and Medicaid. The local match of 20% is a requirement of the OPH grant, which these communities consistently exceed.

Recognizing that adolescents often delay or avoid seeking needed health services in traditional settings, the Louisiana Medicaid Program designated SBHCs as a unique provider type in Louisiana’s CommunityCARE Program. Fifty-two of the 56 SBHCs enrolled and obtained a SBHC Medicaid provider number in 2004-2005.

Type of Sponsorship for each SBHC

